



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 5324

|                             |  |              |                        |                                  |
|-----------------------------|--|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10/502,446 | FILING OR 371(c)<br>DATE<br>03/16/2005<br>RULE | CLASS<br>428 | GROUP ART UNIT<br>1615 | ATTORNEY<br>DOCKET NO.<br>042573 |
|-----------------------------|--|--------------|------------------------|----------------------------------|

## APPLICANTS

Laurence Avazzeri, Besse sur Braye, FRANCE;  
 Jerome Bordeau, La Chartre sur le Loir, FRANCE;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/FR03/00182 01/21/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 02/00948 01/25/2002

|   |                            |                        |                    |                         |
|---|----------------------------|------------------------|--------------------|-------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR COUNTRY<br>FRANCE | SHEETS<br>DRAWING<br>1 | TOTAL CLAIMS<br>19 | INDEPENDENT CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                            |                        |                    |                         |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |                            |                        |                    |                         |

## ADDRESS

38834

## TITLE

Highly-opaque layered sheet and the production method thereof

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1050 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------|---|---|